



JASON L. McCOY, ESQ.  
Mayor

# TOWN OF VERNON

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## Town of Vernon ADA MUNICIPAL GRIEVANCE PROCEDURE

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act. It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in employment practices and policies or the provision of services, activities, programs, or benefits by the Town of Vernon.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request. The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

Name of ADA Coordinator: **Harry Boyko**  
Phone Number: **860-870-3651**  
Address: **55 West Main Street, Vernon CT**

Within 15 calendar days after receipt of the complaint, **Harry Boyko, ADA Coordinator** will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, **Harry Boyko, ADA Coordinator** will respond in writing, and, where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of **Harry Boyko, ADA Coordinator** and offer options for substantive resolution of the complaint.

If the response by **Harry Boyko, ADA Coordinator** does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision of the ADA Coordinator within 15 calendar days after receipt of the response to the **Mayor** or his or her designee.

Within 15 calendar days after receipt of the appeal, the **Mayor** or his or her designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting the **Mayor** or his or her designee will respond in writing, and where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by **Harry Boyko, ADA Coordinator**, appeals to the **Mayor** or his or her designee, and responses from the ADA Coordinator and **Mayor** or his or her designee will be kept by the Town of Vernon for at least three years.

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Jason L. McCoy  
Mayor

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April 11, 2011  
Date



MAYOR  
TOWN OF VERNON

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Page 2 of 2

Adopted by the Vernon Town Council on April 5, 2011.

Bernice K. Dixon

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Vernon Town Clerk



Town Seal